

Division of Environment
Curtis State Office Building
1000 SW Jackson St., Suite 400
Topeka, KS 66612-1367



Phone: 785-296-1535
Fax: 785-559-4264
www.kdheks.gov

Lee A. Norman, M.D., Secretary

Laura Kelly, Governor

November 3, 2020

ESE ALCOHOL, INC
DUANE E BERNING
PO BOX 848
LEOTI, KS 67861

RE: Kansas Water Pollution Control Permit No. I-UA26-NP01
ESE ALCOHOL, INC.

Dear Permittee:

Our records indicate the referenced permit expires November 30, 2021. It is necessary to file an updated water pollution control permit renewal application.

KDHE has completed a portion of the enclosed permit renewal application based upon data already in the KDHE files. Please review these data and make corrections, deletions and additions as needed to complete the form. The completed application should be returned by the date shown on the top of the application renewal form to:

Kansas Department of Health and Environment
Bureau of Water- Technical Services Section
1000 SW Jackson Street, Suite 420
Topeka, KS 66612-1367

No permit fee is required with this application. The permit fee is due annually and will be billed to the permittee approximately one month prior to the due date.

If you have any questions concerning the completion of this application, please contact me at 785.296.5513 or by e-mail at Michael.Beezhold@ks.gov.

Sincerely yours,

Michael Beezhold
Permits & Compliance

Enclosure

KSJ000149

Federal Tracking No.

I-UA26-NP01

Kansas Permit No.

STATE OF KANSAS
WATER POLLUTION CONTROL PERMIT APPLICATION
FOR NON-OVERFLOWING WASTEWATER TREATMENT FACILITIES

This is your Wastewater Treatment Facility permit renewal application. This application should be returned to the address shown at the end of this application by December 30, 2020. Please review the information provided here and make corrections / additions / deletions as appropriate.

Pursuant to K.S.A. 65-164 and 65-165, the undersigned representing

Facility Name: ESE ALCOHOL, INC. (WASTEWATER TREATMENT FACILITY)
 Facility Address: 310 E HIGHWAY 96
 Facility City: LEOTI State KS Zip 67861
 Owner Name: ESE ALCOHOL, INC
 Owner Address: PO BOX 848
 Owner City: LEOTI State KS Zip 67861
 Contact Name: _____
 Contact Address: _____
 Contact City: _____ State _____ Zip _____
 Contact Phone: (Land Line #) _____ (Cell #) _____
 Contact Email: _____

Hereby makes application for a permit for a non-overflowing permit to treat wastewater at

~~SE 1/4, NE 1/4, NW 1/4, SECTION 30, TOWNSHIP 29S, RANGE 18E~~
~~NEOSHO COUNTY, KANSAS~~

SW 1/4 of Section 17, Township 18 S, Range 36 W, Wichita County, Kansas

1. Service Area: No Change - Industrial Facility

Population Served _____

Number of Commercial Food Preparation or Food Service Facilities Served

Restaurants _____

Schools _____

Nursing / Rest Homes _____

Number of Industrial Facilities Served _____

Number of Meat Processing / Locker Plants _____

Describe other facilities that contribute large amounts of wastewater to the wastewater treatment facility.

2. Facility Description – Review and provide corrections, additions, and deletions to the facility description.

THIS FACILITY FERMENTS TREATED SEED GRAIN TO PRODUCE DENATURED ETHANOL FOR FUEL USE. MASH SOLIDS, FACILITY WASH WATER, TRAILER WASH WATER, BOILER BLOWDOWN AND WATER SOFTENER REGENERATE ARE DIRECTED TO ONE OF SIX EARTHEN SETTLING BASINS. EACH OF THE SIX BASINS GOES THROUGH A FILL/SETTLING/DECANTING/DRYING/SOLIDS REMOVAL CYCLE. AFTER THE MASH SOLIDS HAVE SETTLED, MASH WATER IS DECANTED INTO THE WEST IRRIGATION CELL (FORMERLY THE COOLING WATER HOLDING POND) FOR IRRIGATION STORAGE. SOLIDS ARE PERIODICALLY REMOVED FROM THE SETTLING BASINS AND EITHER DIRECTLY APPLIED TO FARM LAND FOR AGRICULTURAL BENEFITS OR STORED AT A CENTRAL STOCKPILE LOCATION PRIOR TO LAND APPLICATION. A CENTRIFUGE IS USED FOR MASH DEWATERING WITH THE CENTRATE DISCHARGED TO ONE OF THE SIX MASH WATER SETTLING BASINS AND THE SEPARATED SOLIDS STORED AT A CENTRAL STOCKPILE LOCATION PRIOR TO LAND APPLICATION.

COOLING TOWER BLOWDOWN, BOILER BLOWDOWN, WATER SOFTENER REJECT AND WASTE RECHARGE FLOWS, REVERSE OSMOSIS CONCENTRATE AND CLEANING FLOWS, FACILITY WASH DOWN AND SEED TRAILER WASH MAY BE DIRECTED TO THE CITY OF LEOTI WASTE WATER TREATMENT PLANT OR CAN BE DIRECTED TO THE SIX EARTHEN SETTLING BASINS AND SUBSEQUENTLY TO THE IRRIGATION HOLDING PONDS FOR RECYCLE OR IRRIGATION. IRRIGATION WATER IS DRAWN FROM THE WEST IRRIGATION CELL. FIVE SITES LOCATED NORTH, EAST AND SOUTH OF THE ETHANOL PLANT ARE IRRIGATED FROM THE WEST IRRIGATION CELL. THE FACILITY'S DESIGN CAPACITY IS 1,000,000 BUSHELS OF SEED GRAIN PER YEAR. SOURCE OF WATER SUPPLY IS GROUNDWATER FROM ONSITE WATER WELLS.

THE FACILITY ALSO INCLUDES AN EAST IRRIGATION CELL WHICH IS CURRENTLY IDLE. SEE PERMIT SUPPLEMENTAL CONDITION NO. 10 FOR RE-ACTIVATION REQUIREMENTS.

3. Final Disposal method currently used or desired. (Check as many as apply) No Change

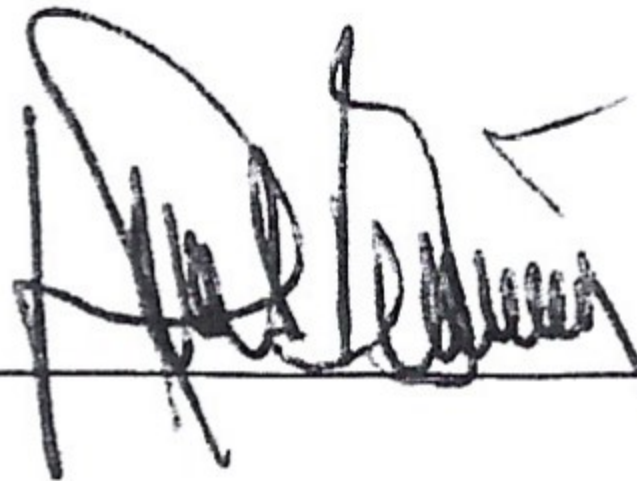
Evaporation _____ Irrigation: _____ Other (Specify) _____

4. Number of Cells Available: No Change Number of Cells Used No Change

I certify under penalty of law that this document and all attachments were prepared and/or reviewed under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather, evaluate and/or review the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering, evaluating and/or reviewing the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I certify that I am authorized to sign this permit application pursuant to 40 CFR 122.22 as noted below.

Signed: _____



Duane Berning

Print or Type Signature

Title: President

Date: 12-16-2020

40 CFR 122.22: This application will be signed by the following: (a) in the case of a corporation, by the principal executive officer of at least the level of Vice President; (b) in the case of a partnership, by a general partner, (c) in the case of a sole proprietorship, by the proprietor, and (d) in the case of publicly-owned treatment works, by the official having responsibility for the overall operations of the treatment works.

Return Completed Application to:

KDHE – Bureau of Water
Technical Services Section
1000 SW Jackson St., Suite 420
Topeka, KS 66612-1367